

Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email address NEXUS BANKRUPTCY BENJAMIN HESTON (297798) 3090 Bristol Street #400 Costa Mesa, CA 92626 Tel: 949.312.1377 Fax: 949.288.2054 ben@nexusbk.com	FOR COURT USE ONLY
UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA	
In re EDMOND CHOUTEAU <div style="text-align: right;">Debtor</div>	CASE NO.: 2:22-bk-12229-WB CHAPTER 13 <div style="text-align: center;">MOTION UNDER LBR 3015-1(n) AND (w) TO MODIFY PLAN OR SUSPEND PLAN PAYMENTS</div> <div style="text-align: center; padding-top: 10px;">[No Hearing Required]</div>

1. The Debtor hereby moves this court to modify the confirmed Chapter 13 Plan or suspend plan payments, as set forth in detail below.

2. The purpose of this motion is to (**check all that apply**):
 - ☒ Cure the delinquency.
 - ☐ Address the expiration of the plan.
 - ☐ Cure the infeasibility of the plan.
 - ☒ Modify the amount of the plan payment, the length of the plan and/or the percentage to be paid to unsecured creditors because of a change in financial circumstances.

3. Terms of original confirmed Chapter 13 plan:
 The Order Confirming Plan was entered on **12/1/2022**.
 Plan payment amount(s): \$1,510 per month for months 1 through 2
 \$1,270 per month for months 3 through 5
 \$1,180 per month for months 6 through 24
 \$1,490 per month for months 25 through 60
 Length of plan: **60** months.
 Percentage paid to Class 5 general unsecured creditors: **20%**.

4. There have been **0** previous modification or suspension orders.
 Plan payments have been suspended for **___** months and/or the plan has been extended for **___** months.

This form is mandatory. It has been approved for use in the United States Bankruptcy Court for the Central District of California.

5. Current plan terms (**complete this section if the confirmed chapter 13 plan has been subject to a previous modification or suspension order**):

Plan payment amount(s): \$___ per month.

Length of plan: ___ months.

Percentage paid to Class 5 general unsecured creditors: ___%.

6. Proposed modification:

☒ Suspend (*indicate number of plan payments*) **3** plan payments.

☐ Extend the term by (*indicate number of months*) ___ month(s).

☐ Reduce the term by (*indicate number of months*) ___ month(s).

☐ Increase the plan payment from \$___ to \$___ from (date) ___ to (date) ___.

☐ Reduce the plan payment from \$___ to \$___ from (date) ___ to (date) ___.

7. Since the Order Confirming Plan or the last modification or suspension order was entered, the debtor's(s') circumstances have changed in the following respect:

See attached Declaration of Edmond Chouteau.

File and serve amended schedules I and J (if appropriate) and supporting documentation concerning the basis for this motion including, but not limited to, proof of income.

8. If this motion is granted, the last plan payment due would be payable **60** months after the first plan payment was due.

9. If this motion is granted:

☒ There will be no change in the percentage paid to Class 5 general unsecured creditors,

OR

☐ The percentage paid to Class 5 general unsecured creditors will change from ___% to ___%.

Date: December 11, 2024

/s/Benjamin Heston

Benjamin Heston

Attorney for Debtor

NEXUS BANKRUPTCY
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Attorney for Debtor

UNITED STATES BANKRUPTCY COURT
CENTRAL DISTRICT OF CALIFORNIA
LOS ANGELES DIVISION

In re:

EDMOND CHOUTEAU

Debtor.

Case No: **2:22-bk-12229-WB**

Chapter 13

**DECLARATION OF DEBTOR IN
SUPPORT OF MOTION TO MODIFY
PLAN**

I, Edmond Chouteau, declare as follows:

1. I am the Debtor in the above-captioned bankruptcy proceeding. I have personal knowledge of all matters stated herein. On all matters stated on information and belief, I believe those allegations to be true. I could competently testify to the allegations contained herein.
2. When my case was filed, my only source of income was from State Disability. Approximately 5 months ago, these disability payments ran out and my income dropped to \$0.
3. With the assistance of an attorney, I have been in the process of applying for Social Security Disability Income since before my State Disability payments ran out. I have been told that it will take another 2 to 3 months before my application is granted, and that I will be receiving \$3,000 to \$3,400 per month.

1 4. Once I am receiving these disability payments, I do not foresee any issues with
2 successfully completing my Chapter 13 Plan.

3 5. I declare under penalty of perjury under the laws of the United States that the
4 foregoing is true and correct.
5

6 Date: December 11, 2024


EDMOND CHOUTEAU

PROOF OF SERVICE OF DOCUMENT

I am over the age of 18 and not a party to this bankruptcy case or adversary proceeding. My business address is:

**3090 Bristol Street #400
Costa Mesa, CA 92626**

A true and correct copy of the foregoing document entitled (*specify*): **Motion Under Local Bankruptcy Rule 3015-1(n) and (w) To Modify Plan or Suspend Plan Payments** will be served or was served **(a)** on the judge in chambers in the form and manner required by LBR 5005-2(d); and **(b)** in the manner stated below:

1. TO BE SERVED BY THE COURT VIA NOTICE OF ELECTRONIC FILING (NEF): Pursuant to controlling General Orders and LBR, the foregoing document will be served by the court via NEF and hyperlink to the document. On **December 11, 2024**, I checked the CM/ECF docket for this bankruptcy case or adversary proceeding and determined that the following persons are on the Electronic Mail Notice List to receive NEF transmission at the email addresses stated below:

Nancy K Curry (TR) TrusteeECFMail@gmail.com
Dane W Exnowski dane.exnowski@mccalla.com, bk.ca@mccalla.com, mccallaecf@ecf.courtdrive.com
Kirsten Martinez Kirsten.Martinez@bonialpc.com, Notices.Bonial@ecf.courtdrive.com
United States Trustee (LA) ustpregion16.la.ecf@usdoj.gov
Fanny Zhang Wan Fanny.Wan@mccalla.com, mccallaecf@ecf.courtdrive.com

☐ Service information continued on attached page

2. SERVED BY UNITED STATES MAIL:

On _____, I served the following persons and/or entities at the last known addresses in this bankruptcy case or adversary proceeding by placing a true and correct copy thereof in a sealed envelope in the United States mail, first class, postage prepaid, and addressed as follows. Listing the judge here constitutes a declaration that mailing to the judge will be completed no later than 24 hours after the document is filed.

☐ Service information continued on attached page

3. SERVED BY PERSONAL DELIVERY, OVERNIGHT MAIL, FACSIMILE TRANSMISSION OR EMAIL (*state method for each person or entity served*): Pursuant to F.R.Civ.P. 5 and/or controlling LBR, on _____, I served the following persons and/or entities by personal delivery, overnight mail service, or (for those who consented in writing to such service method), by facsimile transmission and/or email as follows. Listing the judge here constitutes a declaration that personal delivery on, or overnight mail to, the judge will be completed no later than 24 hours after the document is filed.

☐ Service information continued on attached page

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Benjamin R Heston 297798

Date

Printed Name

Signature